01258-09 W.

DECLARATION AND POWER OF ATTORNEY U.S.A.

1	FOR ATTORNEYS' USE ONLY
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	P70195US0

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

matter which is claimed and for which p DEVICE FOR TREATING A						
which is described and claimed in:	X PCT International	Application No. PCT/EP03/05377		filed	May 22,	2003
	_	n application Serial No.				
the attached specification						
	(if applicable) a					
Lacknowledge the duty to disclose info	rmation which is material to pat under Title 35. United States Co	above-identified specification, including the c entability as defined in Title 37, Code of Feder ode, §119 (a)-(d) of any foreign application(s) the te before that of the application on which priori	ral Regulations, §1.5 for patent or invento	56.	below and h	ave also identified below
Prior Foreign Application(s)					Priority Cta	simed
102 24 750.1	Germany		ne 2002		X	
(Number)	(Country)	(Day/M	lonth/Year Filed)		Yes	No
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I hereby claim the benefit under Title 3	5, United States Code,§119(e)	of any United States provisional application(s)	listed below:			
		Application			Filing Date	9
Application 170.	E United States Code \$130 of	any United States application(s) listed below	and insofar as the s	subject matter of eac	th of the clair	ms of this application is no
distance of in the asias I laited States are	olication in the manner provider	d by the first paragraph of Title 35, United Stat 6 which became available between the filing d	es Code, \$112, Laci	knowledge the duty	to disclose i	ntormation which is mater
(Application Serial No.)		(Filing Date)		(Status: patented,	pending, ab	andoned)
termonet all business in the Datent a	and Trademark Office conne	e following attorneys (Registration No.) to	N JR (20 851): J	OHN CLARKE HO	OLMAN (22	2.769): MARVIN R. ST
transact all business in the Patent a 640): ALLEN S. MELSER (27,215):	INDICATE OF THE PROPERTY OF T	cited therewith. HARVEY B. JACOBSOI (26,421); JONATHAN L. SCHERER (29 2)	N, JR. (20,851); JO 1,851); IRWIN M. /	OHN CLARKE HO	OLMA <u>N (22</u> ,007); WILI G:	2,769); MARVIN R. ST LIAM E. PLAYER <u>(</u> 31,
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DATE DS. 10. 2004 DATE

DATE

X Additional inventors are named on separately numbered sheets attached hereto.

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States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

• Inve	entor(s) name must includ	e at least one unabbreviated first or o	middle name.				
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205	1120.02.1	CITY		/ /		Germany	
×		Loehnberg		Germany U		STATE OR COUNTRY	IZIP CODE
1 [POST OFFICE	POST OFFICE ADDRESS		CITY		Germany	35792
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n	FULL NAME *	FAMILY NAME		GIVEN NAME		MIDDLE NAME	
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	POST OFFICE	POST OFFICE ADDRESS)	l .		Germany	66606
	ADDRESS	Ringstrasse 7		St. Wendel		MIDDLE NAME	
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tro	further declare that ue, and further that r imprisonment or b	all statements made herein these statements were ma oth, under section 1001 of T any patent issuing thereon.	itle 18 of the Ur	nited States Code; and t	hat such w	rillful false statements may	y jeopardize the validit
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DECLARATION AND POWER OF ATTORNEY U.S.A.

FOR ATTORNEYS' USE ONLY	
ATTORNEYS' DOCKET NO.	
P70195US0	

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION;

As a below named inventor, I declare that first and sole inventor (if only one name is matter which is claimed and for which pat DEVICE FOR TREATING A MI	t my residence, post office address and citizenship are stated below next to my name listed at 201 below), or an original, first and joint inventor (if plural inventors are named ent is sought on the invention entitled:	e, the information given herein is true, that I believe that I am the original, it below at 201-203, or on additional sheets attached hereto) of the subject
which is described and claimed in:	X PCT International Application No. PCT/EP03/05377	filed May 22, 2003

the attached specification I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: **Priority Claimed** Prior Foreign Application(s) X 4 June 2002 Germany 102 24 750.1 (Day/Month/Year Filed) (Country) (Number) (Day/Month/Year Filed) (Country) (Number) (Day/Month/Year Filed) (Country) (Number) I hereby claim the benefit under Title 35, United States Code,§119(e) of any United States provisional application(s) listed below: Filing Date Application No. I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this (Status: patented, pending, abandoned) (Filing Date) (Application Serial No.) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (29,851); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); MICHAEL R. SCHERER (29,85 YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES (22,772)

SEND CORRESPONDENCE TO:

CUSTOMER NO. 00136

JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20004

DIRECT TELEPHONE CALLS TO:

(please use Attorney's Docket No.) (202) 638-6666

JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY

entor(s) name must include at least one unabbreviated first or middle name

		FAMILY NAME	GIVEN NAME	MIDDLE NAME	
H	OF INVENTOR		Josef	COUNTRY OF CITIZE	NSHID
Ļ		CITY	STATE OR FOREIGN COUNTRY	Germany	1431 111
201		Mainz-Kastel	Germany	STATE OR COUNTRY	ZIP CODE
	. ••.	POST OFFICE ADDRESS Carlowitzstrasse 18	Mainz-Kastel	Germany	55252
┝	FULL NAME *	FAMILY NAME 30.10.04	GIVEN NAME	MIDDLE NAME	
		HAHMANN,	Uwe STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZE	NSHIP
202	RESIDENCE & CITIZENSHIP	Tipsenbronn Durmersheim	Germany	Germany	
2		POST OFFICE ADDRESS Hans - Thomas Henhoster Strasse 16 Straße 26	Tiefenbronni Durmersheim	STATE OR COUNTRY Germany	ZIP CODE 75253 76448
⊢	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
1		HERKLOTZ	Martin	DOLLATON OF CITIZE	NOUID
l	RESIDENCE &		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZE	NSHIP
203	CITIZENSHIP	Heusenstamm	Germany	Germany ISTATE OR COUNTRY	ZIP CODE
ľ	POST OFFICE ADDRESS	POST OFFICE ADDRESS Dietzenbacher Strasse 1	CITY Heusenstamm	Germany	63150

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

13ightions of mitaliness	SIONATURE OF HIVE HTOP 202	SIGNATURE OF INVENTOR 203*
DATE	DATE 30.10.04	DATÉ

X Additional inventors are named on separately numbered sheets attached hereto.

(COPYING WITHOUT DELETIONS PERMITTED)

* Inve	ntor(s) name must inclu	de at least one unabbreviated first or middle nam	ne.	MIDDLE NAME	1
П		FAMILY NAME	GIVEN NAME	MIDDEE NAME	ì
1	OF INVENTOR	LAUER	Martin	COUNTRY OF CITIZENS	HIP
l∡ŀ	RESIDENCE &	CITY	STATE OR FOREIGN	Germany	
204	CITIZENSHIP	St. Wendel	Germany	STATE OR COUNTRY	ZIP CODE
lł	POST OFFICE	POST OFFICE ADDRESS	CITY	017112	66606
	ADDRESS	Auf den Hollerstock 8	St. Wendel	MIDDLE NAME	
П	FULL NAME *	FAMILY NAME	GIVEN NAME	WIDDLE NAME	
ll	OF INVENTOR	MANKE	Joachim	COUNTRY OF CITIZENS	HIP
	RESIDENCE &	CITY	STATE OR FOREIGN		/' '''
205	CITIZENSHIP	Loehnberg	Germany	Germany STATE OR COUNTRY	ZIP CODE
1 1	POST OFFICE	POST OFFICE ADDRESS	CITY		35792
ł	ADDRESS	In den Bruechern 6	Loehnberg	MIDDLE NAME	00.02
H	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
1	OF INVENTOR		Peter	THE STATE OF STREET	SUID
	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZENS	סחור
206	CITIZENSHIP	Friedrichsdorf	Germany	Germany STATE OR COUNTRY	ZID CODE
1	POST OFFICE	POST OFFICE ADDRESS	CITY		61381
1	ADDRESS	Dieselstrasse 1	Friedrichsdorf	Germany	01301
\vdash	FULL NAME *		GIVEN NAME	MIDDLE NAME	
1	OF INVENTOR		Manfred		0.110
Į.	RESIDENCE &	ICITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
207	CITIZENSHIP	St. Wendel	Germany	Germany	ZIP CODE
	POST OFFICE	THE APPRECE	CITY	[57,112 511 511	66606
ı	ADDRESS	Ringstrasse 7	St. Wendel	Germany	00000
┢	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
1	OF INVENTOR		Alexander		
1	PERIODENCE O		STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
208	CITIZENSHIP	Langen	Germany	Germany	TAID CODE
1	POST OFFICE		CITY	STATE OR COUNTRY	63225
1	ADDRESS	Im Singes 41	Langen	Germany	03225
⊢	FULL NAME *		GIVEN NAME	MIDDLE NAME	
	OF INVENTOR		_		
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1	OF INVENTOR	i			COUID
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١	POST OFFICE		CITY	STATE OR COUNTRY	211- 0001
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t	FULL NAME	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
	OF INVENTO	l l			MCHID
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DECLARATION AND POWER OF ATTORNEY U.S.A.

FOR ATTORNEYS' USE ONLY
ATTORNEYS' DOCKET NO.
P70195US0

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

_	rst and sole inventor (if only one latter which is claimed and for w DEVICE FOR TREATING	S A MEDIC	ALL	_IQUID									
느	EVICE FOR TREATING					DOT/FD02/05	277			filed	May 2	2, 2003	
w	hich is described and claimed in	n: [X P	CT International Applica	tion No.	PC I/EPU3/05	311			- filed			
	the attached specification	Į	ا ل	ne specification in applic		al No.				-			
	hereby state that I have reviewe			(if applicable) and ame		anneification inclu	tion the clai	ms, as amended b	y any an	endment r	eferred to	above.	
	hereby state that I have review acknowledge the duty to disclos hereby claim foreign priority be oreign application for patent or i	se momanon v	W. I. II.	to material to pro-		r r	cation(s) for	r natent of invento	6. 's certific	ate listed t	elow and		identified below a
F	Prior Foreign Application(s)						4 June	2002			X		
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	I hereby claim the benefit under	r Title 26 Unite	ed Stat	tes Code.§119(e) of any	United Sta	ates provisional ap	olication(s)	listed below:					
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	Application No. I hereby claim the benefit under				Inited State	es application(s) IIS	(eo below a	nu, maciai as inc			ch of the o	claims of the	nis application is no tion which is mater
	I hereby claim the benefit under disclosed in the prior United Stratentability as defined in Title application:	ates application 37, Code of Fe	n in the	e manner provided by the Regulations, §1.56 which	ne first para ch became	agraph of Tille 35, I available between	Jnited State the filing da	es Code, 9112, 1 at	lication a	ng the nati	orial of the		
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			or II	ereby appoint the follo	owing atto	rneys (Registrat	on No.) to	prosecute this a	pplication	n, receive	and act	on instru	ctions from my a
1 t	/ER OF ATTORNEY: As a r ransact all business in the P 40); ALLEN S. MELSER (2 N S. HAM (45,307) and NA	atent and tra	IAFI	R SLOBASKY (26,4	therewith (21); JON	I. HARVEY B. JA JATHAN L. SCH	ACOBSON ERER (29	1, JR. (20,851); . ,851); IRWIN M.	AISEN	BERG (18	9,007), V	VILLIAM	E. PLAYER (31,
0	N S. HAM (45,307) and 107												
		DENCE TO:	CU	STOMER NO. 0013	6			DIRECT TELE	PHONE	CALLS T	FO: ocket No	(202)	638-6666
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I	. 022 /		Martin		
L	OF INVENTOR	LAUER	STATE OR FOREIGN	COUNTRY OF CITIZENSI	HP
5	RESIDENCE &	CITY	Germany	Germany	
٦	CITIZENSHIP	St. Wendel POST OFFICE ADDRESS	CITY	STATE OR COUNTRY Z	
	POST OFFICE	Auf den Hollerstock 8	St. Wendel	Germany 6	6606
4	ADDRESS		GIVEN NAME	MIDDLE NAME	
1	FULL NAME *	FAMILY NAME	Joachim	1	
ł	OF INVENTOR	MANKE	STATE OR FOREIGN	COUNTRY OF CITIZENS	HIP
Sg	RESIDENCE &	CITY	Germany	Germany	
<u>ت</u>	CITIZENSHIP	Loehnberg	CITY	STATE OR COUNTRY	ZIP CODE
ı	POST OFFICE	POST OFFICE ADDRESS	Loehnberg	Germany	35792
	ADDRESS	In den Bruechern 6	GIVEN NAME	MIDDLE NAME	
	FULL NAME *	FAMILY NAME			
	OF INVENTOR	SCHEUNERT	Peter STATE OR FOREIGN	COUNTRY OF CITIZENS	HIP
9	RESIDENCE &		= ''	Germany	
206	CITIZENSHIP	Friedrichsdorf	Germany	STATE OR COUNTRY	ZIP CODE
	POST OFFICE	POST OFFICE ADDRESS	CITY Friedrichsdorf		61381
	ADDRESS	Dieselstrasse 1		MIDDLE NAME	
一	FULL NAME *	FAMILY NAME	GIVEN NAME	11100000	
	OF INVENTOR		Manfred	COUNTRY OF CITIZENS	SHIP
_	RESIDENCE &		STATE OR FOREIGN	Germany	5
2	CITIZENSHIP	St. Wendel	Germany	STATE OR COUNTRY	ZIP CODE
207	POST OFFICE	POST OFFICE ADDRESS	CITY	Germany	66606
	ADDRESS	Ringstrasse 7	St. Wendel	MIDDLE NAME	
_	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
	OF INVENTOR		Alexander	COUNTRY OF CITIZEN	CUID
_	DECIDENCE P		STATE OR FOREIGN	•	31111
708 708	CITIZENSHIP	Langen	Germany	Germany STATE OR COUNTRY	TZIP CODE
l	POST OFFICE		CITY		63225
1	ADDRESS	Im Singes 41	Langen	Germany	100220
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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1)1216-0116.

DECLARATION
AND POWER OF ATTORNEY

	FOR ATTORNEYS' USE ONLY
	ATTORNEYS' DOCKET NO.
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ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

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name	the information given herein is true, that I believe that I am the original.	

5	matter which is claimed and for which p						or on additional sheets	
-1	DEVICE FOR TREATING AT	NEDICAL EIGON						
7	which is described and claimed in:	X PCT Inter	national Application I	No. PCT/EP03/0537	7		filed May 22,	2003
]	_			Serial No.			filed	
	the attached specification		licable) and amended					
	I hereby state that I have reviewed and		eta of the above iden	tified specification, includin	the claims, as	amended by any a	mendment referred to a	bove.
	I hereby state that I have reviewed and I acknowledge the duty to disclose info I hereby claim foreign priority benefits i foreign application for patent or inventor	rmation which is mater	States Code 8119 /s	(1-(d) of any foreign applical	ion(s) for patent	or inventor's certif	icate listed below and h	ave also identified below a
	Prior Foreign Application(s)						Priority Cla	amed
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	(Number)	(Coun	try)		(Day/Month/Year	Filed)	Yes	No
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	I hereby claim the benefit under Title 3	or 11-2	S119(a) of any limits	ad States provisional applic	ation(s) listed be	low:		
١				App	dication No		Filing Date	e
		Fil		and the second second	balance and incof	or or the subject t	natter of each of the clai	ims of this application is no
	I hereby claim the benefit under Title 3 disclosed in the prior United States ap patentability as defined in Title 37, Co application:	plication in the manne de of Federal Regulati	er provided by the firstions, §1.56 which bed	t paragraph of Title 35, Unit came available between the	ed States Code, filing date of the	§112, I acknowled prior application	ge the duty to disclose and the national or PCT	information which is materi international filing date of t
١	(Application Serial No.)			(Filing Date)		(Statu	s: patented, pending, at	pandoned)
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c	d transact all business in the Patent a 0,640); ALLEN S. MELSER (27,215) DON S. HAM (45,307) and NATHAN	and Trademark Offic ; MICHAEL R. SLO IEL A. HUMPHRIES	BASKY (26,421); (22,772)	JONATHAN L. SCHERI	ER (29,851); IF	RWIN M. AISEN	BERG (19,007); WIL	LIAM E. PLAYER (31,4
	SEND CORRESPONDENCE		ER NO. 00136 or		DIREC	T TELEPHONE	orney's Docket No.)	(202) 638-6666
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X Additional inventors are named on separately numbered sheets attached hereto.

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* Inventor(s) name must include at least one unabbreviated first or middle name.

* Inve		de at least one unabbreviated first or middle nar		MIDDLE NAME		
П		FAMILY NAME	GIVEN NAME	WIDDLE NAME		
ll	OF INVENTOR	LAUER	Martin	COUNTRY OF OUTSEN	21110	
4	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZENS	SHIP	
204	CITIZENSHIP	St. Wendel	Germany	Germany		
l t	POST OFFICE	POST OFFICE ADDRESS	CITY		ZIP CODE	
1 1	ADDRESS	Auf den Hollerstock 8	St. Wendel	Germany	66606	
П	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
1 1	OF INVENTOR	MANKE	Joachim			
	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP	
205	CITIZENSHIP	Loehnberg	Germany	Germany		
1 1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	In den Bruechern 6	Loehnberg	Germany	35792	
H			GIVEN NAME	MIDDLE NAME		
ll	. 022	FAMILY NAME	_	MIDDEL TO WILL		
H	OF INVENTOR	SCHEUNERT	Peter	COUNTRY OF CITIZEN	CHID	
20e	RESIDENCE &	CITY	STATE OR FOREIGN	Germany	Silir	
2	CITIZENSHIP	Friedrichsdorf	Germany	STATE OR COUNTRY	TIP CODE	
1 1	POST OFFICE	POST OFFICE ADDRESS	CITY		61381	
	ADDRESS	Dieselstrasse 1	Friedrichsdorf	Germany	101301	
	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
1 1	OF INVENTOR	WEIS	Manfred			
_	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP	
207	CITIZENSHIP	St. Wendel	Germany	Germany		
1 1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE	
Ш	ADDRESS	Ringstrasse 7	St. Wendel	Germany	66606	
Н	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
1	OF INVENTOR	BONGERS	Alexander	1		
_	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP	
208	CITIZENSHIP	Langen	Germany	Germany		
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	Im Singes 41	Langen	Germany	63225	
\vdash	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
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	OF INVENTOR	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	ISHIP	
209	RESIDENCE &	CITY	STATE OILT OILEON			
1''	CITIZENSHIP	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	IZIP CODE	
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\vdash	ADDRESS	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
ı	FULL NAME *	FAMILY NAME	GIVEI IANIE			
1	OF INVENTOR		STATE OR FOREIGN	COUNTRY OF CITIZEN	ISHIP	
210	RESIDENCE &	CITY	STATE OR FUREIGN	COUNTRY OF CHIZE	10. III	
12	CITIZENSHIP		CITY	STATE OR COUNTRY	TZIP CODE	
1	POST OFFICE	POST OFFICE ADDRESS	CITY	Jane OK COUNTRY	12.11 0000	
<u> </u>	ADDRESS			AUDDLE MAME	<u></u>	
	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
	OF INVENTOR				10.110	
1			STATE OR FOREIGN	COUNTRY OF CITIZEN	12HIS	
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of the application of any patent issuing thereon.							
SIGNATURE OF INVENTOR 204 *	SIGNATURE OF INVENTOR 205 *	SIGNATURE OF INVENTOR 206 *					
DATE 27.70.2004	DĂTE	DATE					
SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 209 *					
DATE	DATE	DATE					

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DECLARATION AND POWER OF ATTORNEY U.S.A.

FOR ATTORNEYS' USE ONLY	
ATTORNEYS' DOCKET NO.	
P70195US0	

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

	matter which is claimed and for which patent is sought on the invention entitled: DEVICE FOR TREATING A MEDICAL LIQUID								
				DOT/ED02/05277			filed Ma	, 22 2	003
	which is described and claimed in:			PCT/EP03/05377			filed	,, _	.003
	the attached specification	the specification	in application Seria	al No.			med		
		(if applicable)	and amended on				dmont coforce	d to abo	
	I hereby state that I have reviewed and u I acknowledge the duty to disclose inform I hereby claim foreign priority benefits ur foreign application for patent or inventor	nation which is material to pa	nde 6119 (a).(d)	of any foreign application(s)	for patent or inventor	6. 's certificate	e listed below	and have	e also identified belov
	Prior Foreign Application(s)						_	ity Claim r	
	102 24 750.1	Germany			ne 2002		X Yes	Ļ	 No
	(Number)	(Country)		(Day/N	/lonth/Year Filed)				
					415 0(Eil-4)		Yes	L	 No
	(Number)	(Country)		(Day/n	Month/Year Filed)		F3	r	
		. <u></u> -			4 - th O(a Filed)		L_I Yes	L	No.
	(Number)	(Country)		(Day/N	Month/Year Filed)		165		
	I hereby claim the benefit under Title 35	, United States Code,§119(e	e) of any United Sta	ates provisional application(s	s) listed below:				
	Application No.	Filing Date	e .	Application	on No		Filir	g Date	
				tt st (-) linted bolow	and incofer as the s	whiert matte	er of each of t	ne claims	s of this application is
	I hereby claim the benefit under Title 35 disclosed in the prior United States app patentability as defined in Title 37, Code application:	e of Federal Regulations, §1.	.56 which became	available between the filing	date of the prior appl	ication and	the national o	r PCT int	ternational filing date
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	transact all business in the Patent ar	nd Trademark Office conn MICHAEL R. SLOBASK\	the following attor nected therewith. Y (26,421); JON			plication,		act on in	nstructions from my 769): MARVIN R. S
	VER OF ATTORNEY: As a named in transact all business in the Patent ar	nd Trademark Office confinence on the MICHAEL R. SLOBASK) LA. HUMPHRIES (22,7) TO: CUSTOMER NO. or	the following attornected therewith. Y (26,421); JON/ 72)	rneys (Registration No.) t	9,851); IRWIN M.	oplication, OHN CLA AISENBE	receive and RKE HOLM RG (19,007)	act on in AN (22,7 ; WILL	nstructions from my 769): MARVIN R. S
	VER OF ATTORNEY: As a named in transact all business in the Patent ar 540); ALLEN S. MELSER (27,215); DN S. HAM (45,307) and NATHANIE SEND CORRESPONDENCE	nd Trademark Office confi MICHAEL R. SLOBASKY EL A. HUMPHRIES (22,7) TO: CUSTOMER NO.	the following attornected therewith. Y (26,421); JON/ 72) 00136 DLMAN BILITY COMPAI ET, N.W.	rneys (Registration No.) t . HARVEY B. JACOBSC ATHAN L. SCHERER (2	DiRECT TELEF (please t	oplication, OHN CLA AISENBE PHONE CA Ise Attorne	receive and RKE HOLM RG (19,007) ALLS TO: ey's Docket	act on in AN (22,7 ; WILLI No.) (20	nstructions from my 769); MARVIN R. S AM E. PLAYER (3 ⁻
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	VER OF ATTORNEY: As a named in transact all business in the Patent ar (40); ALLEN S. MELSER (27,215); IN S. HAM (45,307) and NATHANIE SEND CORRESPONDENCE PROFE	nd Trademark Office confidence of the Michael R. Slobasky La. Humphries (22,7). TO: Customer No. or JACOBSON HC SSIONAL LIMITED LIAI 400 SEVENTH STRE WASHINGTON, D.C.	the following attor nected therewith. Y (26,421); JON/ 72) 0C136 DLMAN BILITY COMPAI ET, N.W. 20004 or middle name.	rneys (Registration No.) t . HARVEY B. JACOBSC ATHAN L. SCHERER (2	DiRECT TELEF (please t	PHONE CA See Attorna	receive and RKE HOLM RG (19,007) ALLS TO: ey's Docket	actonin AN (22,7 ; WILLI No.) (20 HOLI	nstructions from my 769); MARVIN R. S AM E. PLAYER (3** 02) 638-6666
	VER OF ATTORNEY: As a named in ransact all business in the Patent ar 40); ALLEN S. MELSER (27,215); N. S. HAM (45,307) and NATHANIE SEND CORRESPONDENCE PROFE entor(s) name must include at least FULL NAME.* FAMILY NAME	nd Trademark Office confidence of the Michael R. Slobasky La. Humphries (22,7). TO: Customer No. or JACOBSON HC SSIONAL LIMITED LIAI 400 SEVENTH STRE WASHINGTON, D.C.	the following attor nected therewith. Y (26,421); JON/ 72) 0C136 DLMAN BILITY COMPAI ET, N.W. 20004 or middle name.	rneys (Registration No.) t . HARVEY B. JACOBSC ATHAN L. SCHERER (2 NY /EN NAME	DiRECT TELEF (please t	pplication, OHN CLA AISENBE PHONE CA ISE Attorne JACC ESSIONA	receive and RKE HOLM RG (19,007) ALLS TO: ey's Docket DBSON L LIMITED	act on in AN (22,7); WILLI, WI	nstructions from my 769); MARVIN R. S AM E. PLAYER (3° 02) 638-6666 MAN TY COMPANY
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	PROFESSIDENCE & CITY POST OFFICE ADDRESS FULL NAME TO FAMILY NAME HAHMANN, RESIDENCE & CITY	nd Trademark Office confidence of the Michael R. SLOBASKY, L. A. HUMPHRIES (22,7). TO: CUSTOMER NO. or JACOBSON HC SSIONAL LIMITED LIAI 400 SEVENTH STRE WASHINGTON, D.C one unabbreviated first one trademark.	the following attorected therewith. Y (26,421); JON/72) OC136 OLMAN BILITY COMPAI ET, N.W. 20004 or middle name. GIV Jos ST/ Ge CIT Ma GIV UW ST/	meys (Registration No.) to the HARVEY B. JACOBSC ATHAN L. SCHERER (2) NY YEN NAME SEE ATE OR FOREIGN COUTE TO THE PROPERTY OF THE PROPERTY	DIRECT TELEF (please t	pipication, OHN CLA AISENBE PHONE C/ Ise Attorne JACC ESSIONA MI GC German	PECEIVE AND RECEIVE AND RECEIVE AND RECOUNTRY OF COUNTRY OF COUNTR	HOLI E CITIZE	nstructions from my 769); MARVIN R. SAM E. PLAYER (3102) 638-6666 MAN TY COMPANY ENSHIP ZIP CODE 55252
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X Additional inventors are named on separately numbered sheets attached hereto.

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SIGNATURE OF INVENTOR 201°

SIGNATURE OF INVENTOR 203*

DATE

SIGNATURE OF INVENTOR 202*

DATE

* Inventor(s) name must include at least one unabbreviated first or middle name.

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i t	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		
ll	ADDRESS	Auf den Hollerstock 8	St. Wendel	Germany	66606	
П	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
ll	OF INVENTOR	MANKE	Joachim			
ري ا	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	ITIZENSHIP	
205	CITIZENSHIP	Loehnberg	Germany	Germany		
1 H	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		
l (ADDRESS	In den Bruechern 6	Loehnberg	Germany	35792	
П		FAMILY NAME	GIVEN NAME	MIDDLE NAME		
ı	OF INVENTOR		Peter			
1 1	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP	
, 28		Friedrichsdorf	Germany	Germany		
``	CITIZENSHIP	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE	
l I	POST OFFICE	Dieselstrasse 1	Friedrichsdorf	Germany	61381	
Н	ADDRESS		GIVEN NAME	MIDDLE NAME		
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2	CITIZENSHIP	St. Wendel	Germany	STATE OR COUNTRY	TZIP CODE	
	POST OFFICE	POST OFFICE ADDRESS	CITY	Germany	66606	
	ADDRESS	Ringstrasse 7	St. Wendel		100000	
	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
	OF INVENTOR	BONGERS	Alexander	OCUMENTO OF CITIZEN	ICHID	
208	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	ISHIP	
×	CITIZENSHIP	Langen	Germany	Germany	TAID CODE	
l	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	63225	
	ADDRESS	Im Singes 41	Langen	Germany	163225	
П	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME		
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DECLARATION AND POWER OF ATTORNEY U.S.A.

1	FOR ATTORNEYS' USE ONLY
	ATTORNEYS' DOCKET NO.
	P70195US0

MIDDLE NAME

Germany

STATE OR COUNTRY

COUNTRY OF CITIZENSHIP

ZIP CODE

63150

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

\neg	first and sale inven	inventor, I declare that my resident tor (if only one name is listed at 20 imed and for which patent is soug	1 below), or an original, first an	nd joint inventor (if plural inver	ntors ar	e named below at 20	01-203, or on add	itional sheets atta	ched hereto) of the subject
É		TREATING A MEDICAL						· · · · · · · · · · · · · · · · · · ·	
102		Table Island in X	PCT International Application	No PCT/EP03/0537	7		file	May 22, 20	03
\subseteq	which is described		the specification in application						
	the attached s	pecification	(if applicable) and amended						
	I acknowledge the	I have reviewed and understand t duty to disclose information which gign priority benefits under Title 35 tor patent or inventor's certificate	he contents of the above-iden	ntified specification, including s defined in Title 37, Code of	r Federa ion(s) fo	r patent or inventor		i below and have	also identified below any
	Prior Foreign Appl	lication(s)						Priority Claime	ed
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103	(Number)		(Country)	(1	(Day/Mo	nth/Year Filed)		Yes N	0
104	I hereby claim the	benefit under Title 35, United Sta	tes Code,§119(e) of any Unite	ed States provisional applica	ation(s) l	isted below:			
뮈	Application No.		Filing Date	Арр	dication	No		Filing Date	
105		benefit under Title 35, United Sta rior United States application in th afined in Title 37, Code of Federal				te of the prior applic	cation and the na	tional or PCT inter	rnational filing date of this
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and	transact all busin	NEY: As a named inventor, I h ess in the Patent and Tradem MELSER (27,215); MICHAEL D7) and NATHANIEL A. HUM	ark Office connected there R. SLOBASKY (26,421); .	with BADVEVB 14(*()	IH SCIN	DR 720 85111 R	JHN LIARKE I	11. JUNIAN (22.70	DELIVER VIN R. STERIN
Γ	SEND CO	RRESPONDENCE TO: CU	STOMER NO. 0C136			DIRECT TELEPI (please us		TO: ocket No.) (202	2) 638-6666
		PROFESSIONAL 400 SE	BSON HOLMAN LIMITED LIABILITY COI VENTH STREET, N.W. IINGTON, D.C. 20004	MPANY		PROFE		ON HOLM	
*Inv	entor(s) name mi	ust include at least one unabb	reviated first or middle na	me.					
П		FAMILY NAME		GIVEN NAME			MIDDLE	NAME	
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201		CITY Mainz-Kastel	STATE OR FÖREIGN COUNT Germany		MIRY COUNTI				
5		POST OFFICE ADDRESS		CITY	-		STATE OR CO	DUNTRY	ZIP CODE
	ADDRESS	Carlowitzstrasse 18		Mainz-Kastel			Germany		55252
Н	FULL NAME *	FAMILY NAME		GIVEN NAME			MIDDLE	NAME	
		HAHMANN,		Uwe	001111		COUNT	DV OF OITIZE	JEUID
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202	POST OFFICE	POST OFFICE ADDRESS		Germany			STATE OR CO		ZIP CODE
		Henhoefer Strasse 16		Tiefenbronn			Germany		75233

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Heusenstamm

STATE OR FOREIGN COUNTRY

GIVEN NAME

<u>Martin</u>

Germany CITY

SIGNATURE OF INVENTOR 201°	SIGNATURE OF INVENTOR 202*	SIGNATURE OF INVENTOR 203*
DATE	DATE	DĄJ€

X Additional inventors are named on separately numbered sheets attached hereto.

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FAMILY NAME

HERKLOTZ

Heusenstamm

POST OFFICE ADDRESS

Dietzenbacher Strasse 1

FULL NAME *

OF INVENTOR

RESIDENCE & CITIZENSHIP

POST OFFICE

ADDRESS

Inve	ntor(s) name must includ	de at least one unabbreviated first or middle nar	ne.	MIDDLE NAME	
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- 1	OF INVENTOR	LAUER	Martin	COUNTRY OF CITIZENS	HIP
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	ADDRESS	Auf den Hollerstock 8	St. Wendel	MIDDLE NAME	-
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٠,	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZENSHIP	
205	CITIZENSHIP	Loehnberg	Germany	Germany	710 0005
-	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	
	ADDRESS	In den Bruechern 6	Loehnberg	Germany	35792
Н	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
			Peter		
1 1	OF INVENTOR	SCHEUNERT	STATE OR FOREIGN	COUNTRY OF CITIZENS	SHIP
20g	RESIDENCE &	CITY	Germany	Germany	
¹	CITIZENSHIP	Friedrichsdorf POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	
۱ ا	POST OFFICE		Friedrichsdorf	Germany	61381
Ш	ADDRESS	Dieselstrasse 1	GIVEN NAME	MIDDLE NAME	
l	FULL NAME *	FAMILY NAME	Manfred	1	
	OF INVENTOR		STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
207	RESIDENCE &		Germany	Germany	
7	CITIZENSHIP	St. Wendel	CITY	STATE OR COUNTRY	ZIP CODE
1	POST OFFICE	POST OFFICE ADDRESS	St. Wendel	Germany	66606
L	ADDRESS	Ringstrasse 7	GIVEN NAME	MIDDLE NAME	
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Į	OF INVENTOR	BONGERS	Alexander STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
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į	POST OFFICE	POST OFFICE ADDRESS	CITY	Germany	63225
	ADDRESS	Im Singes 41	Langen	MIDDLE NAME	
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DECLARATION AND POWER OF ATTORNEY U.S.A.

FOR ATTORNEYS' USE ONLY	Y
ATTORNEYS' DOCKET NO.	

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ALL PATENTS, INCLUDING DESIGN
FOR APPLICATION BASED ON PCT: PARIS CONVENTION;
MON PRIORITY: OR PROVISIONAL APPLICATIONS

which is described and claimed in: The stacked specification Interest of the specification No. Interest of the specification Interest of the specific	DE		or (if only one name is listed med and for which patent in									
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OWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my not transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769), MARNIN R. S. (20,861); JOHN CLARKE R. (20,861); JOHN CLARKE HOLMAN (22,769), MARNIN R. S. (20,861); JOHN CLARKE HOLMAN (22,769), MARNIN R. (20,861); JOHN CLARKE HOLMAN (22	disc pate	closed in the pri entability as del										
OWER OF ATTONNEY: As a named inventor, interby appoint the following attomeys (Registration No.) to prosecute this application, receive and act on instructions from my not branch and transact ail business in the Patient and Trademark Office connected therewish. HARVEY B. JACOBSON J. 8(2,98.51); JINK LARKE HOLLANK POLLARKE PO	그	(App)	lication Serial No.)			(Filing Date)		(Sta	tus: patentec	, pending,	abandone	:d)
and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACUBSUN, JR. (20.83); JUNE DE SAMELSER (27.215); MORALER. R. SLOBASY (26.421); JONATHAN L. SCHERER (28.651); RWIN M. AISEMBERG (19.007); WILLIAME PLAYER (3.200 N.S. HAM (45.307) and NATHANIEL A. HUMPHRIES (22.772) SEND CORRESPONDENCE TO: CUSTOMER NO. 06135 OF JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20020 Inventor(s) name must include at least one unabbreviated first or middle name. FULL NAME OF INVENTOR BEDEN FOR STOFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY Germany FULL NAME FAMILY NAME OF INVENTOR FULL NAME FAMILY NAME OF INVENTOR FULL NAME FAMILY NAME OF INVENTOR FOR STOFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANN RESIDENCE & CITY STATE OR FOREIGN COUNTRY GERMANY GERMANY FOR STATE OR COUNTRY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FORT OFFICE ADDRESS Henhoefer Strasse 16 FULL NAME FINANCE OF FOREIGN COUNTRY GERMANY FOR THE PROPERTY OF CITIZENSHIP FOR THE PR			urse. As a second invent	or Thereby:	annoint the following	attornevs (Registration N	o.) to pro	secute this applica	ition, receiv	e and act o	on instruc	ctions from my
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ACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20004 Inventor(s) name must include at least one unabbreviated first or middle name. FULL NAME : FAMILY NAME OF INVENTOR BEDEN CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY CITIZENSHIP Mainz-Kastel FULL NAME : FAMILY NAME OF INVENTOR HAMMANN, Uwe POST OFFICE ADDRESS CITY CITIZENSHIP To Germany FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS Henhoefer Strasse 16 FULL NAME : FAMILY NAME OF INVENTOR HERKLOTZ STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS Henhoefer Strasse 16 FULL NAME : FAMILY NAME OF INVENTOR HERKLOTZ STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS DIETZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP POST OFFICE POST OFFICE ADDRESS DIETZENSHIP POST OFFICE POST OFF		SEND COR	RESPONDENCE TO:	CUSTOM			Dii				(202) 6	20.0000
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П	FULL NAME *	FAMILY NAME	1		
1	OF INVENTOR	LAUER	Martin	COUNTRY OF CITIZENS	SHIP
1	RESIDENCE &	CITY	STATE OR FOREIGN	1	,
204	CITIZENSHIP	St. Wendel	Germany	Germany STATE OR COUNTRY	ZID CODE
1 1	POST OFFICE	POST OFFICE ADDRESS	CITY	1	66606
1 1	ADDRESS	Auf den Hollerstock 8	St. Wendel	Germany }	00000
H		FAMILY NAME	GIVEN NAME	MIDDLE NAME	
11		MANKE	Joachim		
1	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
205		Loehnberg	Germany	Germany	
Γ	CITIZENSHIP	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
11	POST OFFICE	In den Bruechern 6	Loehnberg	Germany	35792
\mathbf{H}	ADDRESS		GIVEN NAME	MIDDLE NAME	!
	FULL NAME *	FAMILY NAME	Peter	,	
	OF INVENTOR	SCHEUNERT	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
206	RESIDENCE &	CITY		Germany	
×	CITIZENSHIP	Friedrichsdorf	Germany	STATE OR COUNTRY	ZIP CODE
	POST OFFICE	POST OFFICE ADDRESS	Friedrichsdorf	Germany	61381
L	ADDRESS	Dieselstrasse 1	GIVEN NAME	MIDDLE NAME	*
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1	OF INVENTOR	WEIS	Manfred	COUNTRY OF CITIZEN	SHIP
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207	CITIZENSHIP	St. Wendel	Germany	STATE OR COUNTRY	TZIP CODE
ı	POST OFFICE	POST OFFICE ADDRESS	CITY	Germany	66606
1	ADDRESS	Ringstrasse 7	St. Wendel	MIDDLE NAME	
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١	OF INVENTOR	BONGERS	Alexander	COUNTRY OF CITIZEN	ISHID
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DECLARATION AND POWER OF ATTORNEY U.S.A.

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ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

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which is describe	ed and claimed in:	X PCT Intern	national Application No.	PCT/EP03/05377		filed	May 22, 20	003
the attached		=	fication in application Se			filed		
	•	(if appli	cable) and amended on					
I acknowledge the	ne duty to disclose inform reign priority benefits un on for patent or inventor's	ation which is materi der Title 35, United S	al to patentability as det	ed specification, including the fined in Title 37, Code of Fede I) of any foreign application(s) f the application on which prio	eral Regulations, §1.5 for patent or inventor	5 6 .		also identified below a
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(Ar	oplication Serial No.)		(Fil	ing Date)		(Status: patented,	pending, aband	oned)
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ventor(s) name m	oust include at least or	ne unabbreviated t	first or middle name.					
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* Inventor(s) name must include at least one unabbreviated first or middle name.

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1	OF INVENTOR	LAUER	Martin	COUNTRY OF CITIZEN	SHID
204	RESIDENCE &		STATE OR FOREIGN	Germany	OT IIF
~	CITIZENSHIP	St. Wendel	Germany	· · · · · · · · · · · · · · · · · · ·	ZIP CODE
1		POST OFFICE ADDRESS	CITY	į.	66606
	ADDRESS	Auf den Hollerstock 8	St. Wendel	Germany	00000
ı	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
205	OF INVENTOR	MANKE	Joachim		
	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
8	CITIZENSHIP	Loehnberg	Germany	Germany	
ŀ	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	l .
I	ADDRESS	In den Bruechern 6	Loehnberg	Germany	35792
7	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
- 1		SCHEUNERT	Peter		
	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	SHIP
206	CITIZENSHIP	Friedrichsdorf	Germany	Germany	
, 1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
	ADDRESS	Dieselstrasse 1	Friedrichsdorf	Germany	61381
Н	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
				I WOOLE TO WILL	
	O	WEIS	Manfred STATE OR FOREIGN	COUNTRY OF CITIZEN	ICUID
207	RESIDENCE &	CITY	= '	Germany	i Si iir
7	CITIZENSHIP	St. Wendel	Germany		ZIP CODE
	POST OFFICE	POST OFFICE ADDRESS	CITY		166606
Ц	ADDRESS	Ringstrasse 7	St. Wendel_	Germany	100000
	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
	OF INVENTOR	BONGERS	Alexander		
208	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	ISHIP
×	CITIZENSHIP	Langen	Germany	Germany	77/0 0000
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	I .
	ADDRESS	Im Singes 41	Langen	Germany	63225
	FULL NAME *	FAMILY NAME	GIVEN NAME	MIDDLE NAME	
	OF INVENTOR				
6	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY OF CITIZEN	İSHIP
209	CITIZENSHIP				
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